

Summit at Lloyd's

Hazardous Haulage Scheme

Proposal form

Amlin House, Parkway, Chelmsford Essex CM2 0UR

SUMMIT

AT LLOYD'S

Proposer details

Full name of Insured

Trading name (if any)

Full business address
Postcode

Description of business/trade

Type of licence held

1. Are you ADR qualified? Yes No

Name of previous motor insurer

Policy number and expiry date of previous motor insurance

Vehicle and trailer details

Please provide a separate schedule of vehicles and trailers including values

2. Are you or the company the actual owner of the vehicles? Yes No
If **No**, give details

3. Are the vehicles registered in your own or the company's name? Yes No
If **No**, give details

4. Do you have use of or haul any third party trailers? Yes No
If **Yes**, please provide the following information

a) Total value of all third party trailers in your care, custody or control. £

b) Maximum value any one trailer unit. £

5. Are vehicles and trailers kept in a secured locked compound out of business hours? Yes No

6. Are vehicles fitted with any additional security devices e.g. Tracker? Yes No
If **Yes**, give details

Goods carried

7. What type of goods do you carry?

Category	Yes	No	Percentage	Category	Yes	No	Percentage
Category 1	<input type="checkbox"/>	<input type="checkbox"/>	<input type="text"/> %	Category 6	<input type="checkbox"/>	<input type="checkbox"/>	<input type="text"/> %
Category 2	<input type="checkbox"/>	<input type="checkbox"/>	<input type="text"/> %	Category 7	<input type="checkbox"/>	<input type="checkbox"/>	<input type="text"/> %
Category 3	<input type="checkbox"/>	<input type="checkbox"/>	<input type="text"/> %	Category 8	<input type="checkbox"/>	<input type="checkbox"/>	<input type="text"/> %
Category 4	<input type="checkbox"/>	<input type="checkbox"/>	<input type="text"/> %	Category 9	<input type="checkbox"/>	<input type="checkbox"/>	<input type="text"/> %
Category 5	<input type="checkbox"/>	<input type="checkbox"/>	<input type="text"/> %				

Please provide details of goods to be carried

8. Will explosive or radioactive materials be carried at any time?

Yes **No**

If **Yes**, give details including for whom carried

Driver details

9. Do you check your drivers' licences on a regular basis e.g. annually?

Yes **No**

10. Do you check the licences of newly employed drivers?

11. Do you keep copies of licences and details of convictions?

12. In respect of vehicles over 7.5 tonnes, are any drivers under the age of 25?

If **Yes**, give details

13. Do you check the medical history of all new drivers?

Yes **No**

14. Do existing drivers have regular health check?

Operational details

15. Are any of the vehicles used outside of the UK?

Yes **No**

If **Yes**, give details

16. Is any work carried on outside of the EU?

If **Yes**, give details

17. Does your work involve you driving over 200 miles from your depot?

Yes **No**

18. Will any of the vehicles be used airside?

19. Are any vehicles used for time-critical or multidrop deliveries?

If **Yes**, please provide full details

Risk management

General

- | | Yes | No |
|---|--------------------------|--------------------------|
| 20. Do you implement any driver training? | <input type="checkbox"/> | <input type="checkbox"/> |
| 21. If Yes , is this carried out by a recognised training company or qualified person within your company? | <input type="checkbox"/> | <input type="checkbox"/> |
| 22. Do you monitor motor accidents? | <input type="checkbox"/> | <input type="checkbox"/> |
| 23. Do you offer incentives to drivers to reduce the risk of claims e.g. bonus schemes? | <input type="checkbox"/> | <input type="checkbox"/> |
| 24. Do you inspect your vehicles on a regular basis? | <input type="checkbox"/> | <input type="checkbox"/> |

Tankers only

- | | | |
|---|--------------------------|--------------------------|
| 25. Are drivers fully trained on what to do in the event of a spillage? | <input type="checkbox"/> | <input type="checkbox"/> |
| 26. Are drivers issued with a procedures manual for the delivery of fuel? | <input type="checkbox"/> | <input type="checkbox"/> |
| 27. Are drivers trained in the loading or unloading of fuel tankers? | <input type="checkbox"/> | <input type="checkbox"/> |

Declaration

1. We declare that we have read all the statements and particulars given, including those answers written for us by any other person and that to the best of our knowledge and belief, the contents of this form, all attached additional information and other particulars which have been given separately to Summit at Lloyd's by ourselves or our agents are true and complete and that no material facts have been omitted, misrepresented or mis-stated.
2. We agree that this form, any additional information supplied and this declaration shall be the basis of the contract between us and Summit at Lloyd's and we undertake to pay the premium when asked to do so.
3. We agree that Summit at Lloyd's may contact our previous insurers for further information and/or clarification if required.

NOTICES TO THE PROPOSER

Choice of law

There is a choice of law which can apply to this policy but the pre-contractual offer by the Underwriters, subsequent acceptance by you and the contract itself have been made on the basis of English law and this can only be amended with the express written agreement of both parties to the contract.

Complaints

Any enquiry or complaint concerning this insurance should in the first instance be addressed to your broker and then Amlin Insurance Services. If after taking this action you are still dissatisfied, you may ask the Complaints Department at Lloyd's to review your case without prejudice to your rights in English Law. The address is:-

Complaints Department, Lloyd's, One Lime Street, London EC3M 7HA

Complaints that cannot be resolved by them may be referred to the Financial Ombudsman Service. Further details will be provided at the appropriate time.

Drivers of vehicles

Vehicles may not be driven by any person(s) who to your knowledge

- a) Have been convicted of a criminal offence or received a police caution;
- b) Have been refused any motor vehicle insurance;
- c) Suffer from any disease or physical infirmity which impairs ability to drive; or
- d) Have during the past 5 years been convicted of any of the following motor offences: manslaughter, causing death by reckless driving, dangerous driving, driving under the influence of drink or drugs, failing to stop after an accident, any offence or combination of offences, which resulted in suspension from driving unless such person(s) has been declared to us and has been given permission by us to drive such vehicle(s).

PLEASE NOTE: Cover will not begin until Summit at Lloyd's have accepted the risk.

Signed for and on behalf of the proposer by

Signature	Date
Name	
Position in company	



Authorised and regulated by the Financial Services Authority